

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF OHIO
WESTERN DIVISION
at Cincinnati

William Nostheide,

Plaintiff,

vs.

Case Number: 1:24-cv-344
Judge Matthew W. McFarland

Clarigent Corporation, et al.,

Defendants.

CERTIFICATE OF MAILING BY CLERK

The Clerk of the United States District Court for the Southern District of Ohio has been requested to issue the complaint and summons to the defendant(s). The requested service was sent by certified mail on July 15, 2024. The return receipt(s) for certified mail is attached.

BY: s/Z. Cothran
Deputy Clerk

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none">■ Complete items 1, 2, and 3.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature X	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:		B. Received by (Printed Name)	C. Date of Delivery
Clarigent Corporation dba "Clarigent Corporation" 5412 Courseview Drive, Ste 210 Mason, OH 45040		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		LR 4.2 1:24-cv-344	
 9590 9402 8807 4005 9324 33		3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery	
2. Article Number (Transfer from service label) 9589 0710 5270 2134 9583 22		<input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, July 2020 PSN 7530-02-000-9053			
Domestic Return Receipt			

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
DO NOT STICK STICKER ON BACK OF CARD

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none">■ Complete items 1, 2, and 3.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:	B. Received by (Printed Name)		C. Date of Delivery
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
<p style="text-align: center;">For Service Only Don Wright Jr., Registered Agent 5412 Courseview Drive, Ste 210 Mason, OH 45040</p>			
 9590 9402 8807 4005 9324 40		3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
2. Article Number (Transfer from service label) 9589 0710 5270 2134 9583 39		(over \$500) Restricted Delivery	
PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt			

LR4.2 1:24-cv-344

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<p>1. Article Addressed to:</p> <p>Donald Wright Jr 10206 Morrow-Cozaddale Road Morrow, OH 45152</p> <p><i>LR 4.2 1:24-cv-344</i></p>		<p>3. Service Type</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 2134 9583 46</p>		<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p> <p>Domestic Return Receipt</p>	

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<p>1. Article Addressed to:</p> <p>William Haynes 219 Summer Field Lane Lebanon, OH 45036</p> <p>9590 9402 8807 4005 9321 36</p> <p>2. Article Number (Transfer from service label) 9589 0710 5270 2134 9583 53</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p> <p><i>LR 4.2 1:24-cv-34</i></p>			